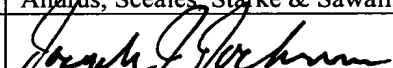
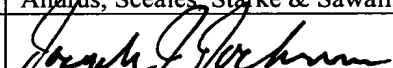
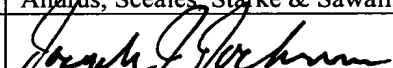
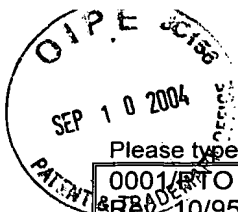


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Jochman Andrus, Scales, Starke & Sawall, LLP</td> <td>Registration Number</td> <td colspan="2">25,058</td> </tr> <tr> <td>Signature</td> <td colspan="2"></td> <td>Date</td> <td>9/7/2004</td> <td>Deposit Account User ID</td> </tr> </tbody> </table>		Large Entity Fee Code	Small Entity Fee Code	Fee Description	Fee Paid	105	130	205	65	Surcharge-late filing fee or oath		127	50	227	25	Surcharge-late provisional filing fee or cover sheet		139	130	139	130	Non-English specification		147	2,520	147	2,520	For filing a request for reexamination		112	920*	112	920*	Requesting publication of SIR prior to Examiner action		113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action		115	110	215	55	Extension for response within first month	\$110	116	400	216	200	Extension for response within second month		117	870	217	435	Extension for response within third month		118	1,510	218	755	Extension for response within fourth month		128	2,060	228	1,030	Extension for response within fifth month		119	310	219	155	Notice of appeal		120	310	220	155	Filing a brief in support of an appeal		121	270	221	135	Request for oral hearing		138	1,510	138	1,510	Petition to institute a public use proceeding		140	110	240	55	Petition to revive unavoidably abandoned application		141	1,320	241	660	Petition to revive unintentionally abandoned application		142	1,320	242	660	Utility issue fee (or reissue)		143	450	243	225	Design issue fee		144	670	244	335	Plant issue fee		122	130	122	130	Petitions to the Commissioner		123	50	123	50	Petitions related to provisional applications		126	240	126	240	Submission of Information Disclosure Statement		581	40	581	40	Recording each patent assignment per property (times number of properties)		146	790	246	395	Filing a submission after final rejection (37 CFR 1.129(a))		149	790	249	395	For each additional invention to be examined (37 CFR 1.129(b))		Other fee (specify) _____					Other fee (specify) _____					SUBTOTAL (1)		(\$)		0		3. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other						FEE CALCULATION (fees effective 10/01/97)						1. 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2. Claims <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Large Entity Fee Code</th> <th>Small Entity Fee Code</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>103</td><td>22</td><td>203</td><td>11</td><td>Claims in excess of 20</td><td></td></tr> <tr><td>102</td><td>82</td><td>202</td><td>41</td><td>Independent claims in excess of 3</td><td></td></tr> <tr><td>104</td><td>270</td><td>204</td><td>135</td><td>Multiple dependent claim</td><td></td></tr> <tr><td>109</td><td>82</td><td>209</td><td>41</td><td>Reissue independent claims over original patent</td><td></td></tr> <tr><td>110</td><td>22</td><td>210</td><td>11</td><td>Reissue claims in excess of 20 and over original patent</td><td></td></tr> <tr> <td colspan="2" style="text-align: right;">SUBTOTAL (2)</td> <td colspan="2" style="text-align: right;">(\$)</td> <td colspan="2" style="text-align: right;">0</td> </tr> </tbody> </table>						Large Entity Fee Code	Small Entity Fee Code	Fee Description	Fee Paid	103	22	203	11	Claims in excess of 20		102	82	202	41	Independent claims in excess of 3		104	270	204	135	Multiple dependent claim		109	82	209	41	Reissue independent claims over original patent		110	22	210	11	Reissue claims in excess of 20 and over original patent		SUBTOTAL (2)		(\$)		0																																																																																																																																																																																																																																																																													
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Patent and Trademark Office: U.S. Department of Commerce

0001/PTO REV 10/95 TRANSMITTAL FORM (to be used for all correspondence after initial filing)	U.S. Department of Commerce Patent and Trademark Office	Application Number	10/002,080	
		Filing Date	10/31/2001	
		First Named Inventor	Kevin S. Stein	
		Group Art Unit	1733	
		Examiner Name	Gladys J. Piazza Corcoran	
Total Number of pages in this Submission		10	Attorney Docket Number	4470-00613

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment <input type="checkbox"/> After final <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement/PTO-1449 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts Under 37 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Checklist and Accompanying Petition <input type="checkbox"/> To Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> After Allowance Communication To Group <input type="checkbox"/> Appeal Communication to Board Of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Additional Enclosure(s) (Please identify below) <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">Return receipt postcard Response Supplemental Declaration of Prior Invention Pursuant to 37 CFR §1.131</div>
<div style="border: 1px solid black; padding: 5px; margin-top: 10px;">Remarks</div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm Or Individual Name	Joseph J. Jochman, Reg. No. 25,058 ANDRUS, SCEALES, STARKE & SAWALL, LLP 100 East Wisconsin Avenue, Suite 1100, Milwaukee, WI 53202
Signature	<i>Joseph J. Jochman</i>
Date	September 7, 2004

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Signature	<i>Barbara A. Johnson</i>	Date	9/7/2004